

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

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| NAME OF COMMITTEE (In Full) Future45 | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00574533 </div> |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> | |

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|---|----------|--|--|--|
| Full Name of Payee Liquidus Marketing | | | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>03</div> <div>2016</div> </div> | |
| Mailing Address 372 W. Ontario Suite 400 | | | Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 100000.00 </div> | |
| City Chicago | State IL | Zip Code 60654 | Transaction ID : 001 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>03</div> <div>2016</div> </div> | |
| Purpose of Expenditure Media placement | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | | |
| Name of Federal Candidate Clinton, Hillary, , , | | | <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ </div> </div> | |
| Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 22147804.86 </div> | | | | |

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|---|----------|--|--|--|
| Full Name of Payee Madison McQueen | | | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>03</div> <div>2016</div> </div> | |
| Mailing Address 135 Richmond Street | | | Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1400.00 </div> | |
| City El Segundo | State CA | Zip Code 90245 | Transaction ID : 002 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>04</div> <div>2016</div> </div> | |
| Purpose of Expenditure Media production | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | | |
| Name of Federal Candidate Clinton, Hillary, , , | | | <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ </div> </div> | |
| Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 22149204.86 </div> | | | | |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 101400.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 101400.00 </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wojciechowski, Maria, , ,

[Electronically Filed]

Date

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D D D

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Y Y Y Y Y Y

11

04

2016

Signature